Skeletal Radiol (2013) 42:587–588
DOI 10.1007/s00256-012-1415-4

TEST YOURSELF: QUESTION

Painful subcutaneous nodule of the arm

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Received: 19 January 2012 / Revised: 4 April 2012 / Accepted: 5 April 2012 / Published online: 14 May 2012

Part I

A 55-year-old man presented with a 2-year history of progressive pain in the right arm, which persisted at night and was exacerbated by exposure to cold. His past medical history was relevant for type 1 diabetes mellitus and hypertension. There was no history of cancer or prior trauma. Physical examination revealed exquisite point tenderness upon palpation of a 5-mm subcutaneous nodule located on the lateral aspect of the right arm, approximately 10 cm distal to the greater tuberosity of humerus. No overlying epidermal abnormality was noted. The axillary lymph nodes felt normal.

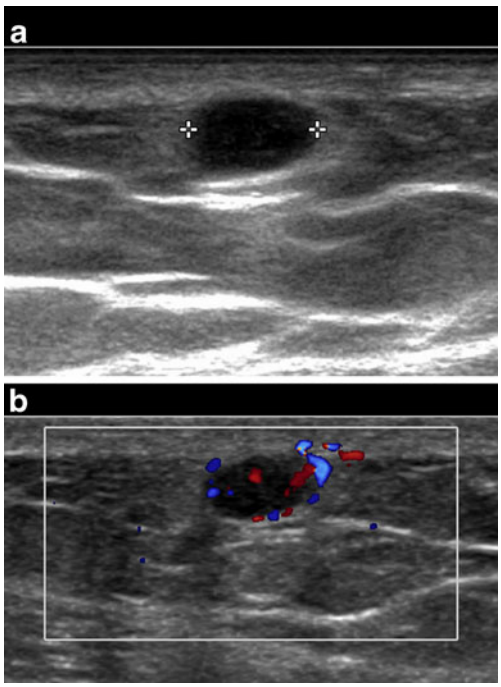

Fig. 1 Longitudinal **a** B-mode and **b** color Doppler US images (17–5 MHz linear probe) of the lateral aspect of the right arm

Fabio Becce and Emilie Uldry contributed equally to this work.

The diagnosis can be found at doi:10.1007/s00256-012-1416-3.

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Fig. 2 Axial **a** T1-weighted (repetition time/echo time, 573/11), **b** fat-suppressed (FS) T2-weighted (5770/86), and **c** gadolinium-enhanced FS T1-weighted (621/11) turbo spin-echo MR images of the right arm. **d** Coronal maximum-intensity projection (MIP) FS T1-weighted (2.8/1.1) gradient-recalled echo MR angiographic view of the right arm, in the early arterial phase (16 s)

Conventional radiographs of the right arm demonstrated no bone abnormality (not shown). Ultrasound (US) examination was subsequently performed, followed by magnetic resonance (MR) imaging for further evaluation (Figs. 1 and 2).

Acknowledgments None.

Funding or Grant None.